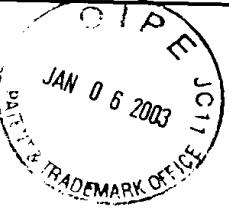


#5

PTO/SB/22 (10-00)

Approved for use through 10/31/2002 OMB 0651-0031  
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<b>PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)</b>		Docket Number (Optional) EPROV-17								
<table border="1"> <tr> <td colspan="2">In re Application of Hans Rudolf MUELLER et al.</td> </tr> <tr> <td colspan="2">Application Number 10/030,692 Filed January 14, 2002</td> </tr> <tr> <td colspan="2">For Process For The Preparation Of Optically Pure Tetrahydropterins And Derivatives, And Specifically Of . . . . .</td> </tr> <tr> <td>Group Art Unit 1624</td> <td>Examiner Mark L. Berch</td> </tr> </table>			In re Application of Hans Rudolf MUELLER et al.		Application Number 10/030,692 Filed January 14, 2002		For Process For The Preparation Of Optically Pure Tetrahydropterins And Derivatives, And Specifically Of . . . . .		Group Art Unit 1624	Examiner Mark L. Berch
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Group Art Unit 1624	Examiner Mark L. Berch									
 <span style="float: right;">RECEIVED JAN 08 2003 TECH CENTER 1600/2900</span>										

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a response in the above identified application.

The requested extension and appropriate non-small-entity fee are as follows (check time period desired):

<input type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$ _____
<input checked="" type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$400.00
<input type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$ _____
<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$ _____
<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$ _____
 <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$ _____.	
<input checked="" type="checkbox"/> A check in the amount of the fee is enclosed.	
<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.	
<input type="checkbox"/> The Commissioner has already been authorized to charge fees in this application to a Deposit Account.	
<input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>13-3402</u> .	

I have enclosed a duplicate copy of this sheet.

I am the  applicant/inventor.

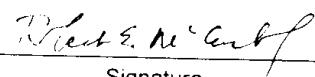
<input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).
<input type="checkbox"/> attorney or agent of record.
<input checked="" type="checkbox"/> attorney or agent under 37 CFR 1.34(a).

Registration number if acting under 37 CFR 1.34(a). 46,044

**WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.**

December 30, 2002

Date



Signature

Robert E. McCarthy

Typed or printed name

NOTE. Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below\*.

\*Total of 1 forms are submitted.

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Date: 12-30-02